## SOUTHERN AND WESTERN DISTRICTS OF TEXAS HOUSTON DIVISION

THIS REPORT IS FOR THE MONTH/YEAR (example: MAY/1995) OF November-2019  All Individual Debtor-In-Possession Checking, Savings, Brokerage Accounts:  BANK NAME:  ACCOUNT NO:  BANK NAME:  ACCOUNT NO:  BANK NAME:  ACCOUNT NO:  ACCOUNT NO:  BANK NAME:  ACCOUNT NO:  BANK NAME:  ACCOUNT NO:  BANK NAME:  ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  ACCOUNT NO:  BANK NAME:   ACCOUNT NO:  ACCOUN	e: MAY/1995) OF Novemore rokerage Accounts:  ACCOUNT NO.:  xxxx4600  xxxx1562  hould be attached  +  Total D	November-2019  All Non-Debtor-In-Possession Accounts:  BANK NAME:  1. (attach list if needed)  2. Bank of Texas  3. (attach list if needed)  Eached for each and all account (when the debtor is an Individual)  (When the debtor is an Individual)	CASE NUMBER:  ossession Accounts:  d all accounts.  n MFR-2  nn MFR-2	BER: 19-30694  ACCOUNT NO.:
THIS REPORT IS FOR THE MONTH/YEAR (example: MA  ACCO  Frost Bank    Frost Bank   Copy of a reconciled statement shoul    Cotal Disbursements from MOR-7    Cotal Business Exhibit B-1    Cotal Business Exhibit B-1    Cotal Disbursements a sole proprietorship)	ay/1995) OF Novemage Accounts:  DUNT NO.:  xxxx4600  xxxx1562  Total D  Total D	All Non-Debtor-In-Pour BANK NAME:  1. Sank of Texas 3. Short each and isbursements fron When the debtor is an Individed.	attach list if needed)    All accounts.	ACCOUNT  ACCOUNT  xxx  \$ 0.00  Total Disbursem
ACCO ANK NAME:  Frost Bank  Acopy of a reconciled statement shoul  Cotal Disbursements from MOR-7  ACCO  ACC	tge Accounts:  OUNT NO.:  xxxx4600  xxxx1562  Id be attached  Total D	All Non-Debtor-In-PeBANK NAME:  1. 2. Bank of Texas 3. d for each and isbursements fron When the debtor is an Individ	attach list if needed)    all accounts.	ACCOUNT    XXX   X
ANK NAME:    Frost Bank	xxxx4600 xxxx1562 xxxx1562 Total D	BANK NAME:  1.  2. Bank of Texas 3. d for each and isbursements from When the debtor is an Individ	attach list if needed)    all accounts.	ACCOUNT
Frost Bank	xxxx4600 xxxx1562 Id be attached	2. Bank of Texas 3. d for each and isbursements from When the debtor is an Individ	attach list if needed)    all accounts.	\$ 0.00 Total Disbursem
Frost Bank  Frost Bank  (attach list if needed)  Copy of a reconciled statement shoul  otal Disbursements from MOR-7  When the debtor is a sole proprietorship)	xxxx4600 xxxx1562 Id be attached	3. Bank of Texas 3. Carrest and for each and isbursements from When the debtor is an Individ	attach list if needed)    all accounts.	\$ 0.00 Total Disbursem
Frost Bank  (attach list if needed)  Copy of a reconciled statement shoul  otal Disbursements from MOR-7  r Small Business Exhibit B-1  (When the debtor is a sole proprietorship)	xxxx1562 Id be attached  Total D	d for each and isbursements from when the debtor is an Individ	attach list if needed)  all accounts.  MFR-2  ual)	\$ 0.00 Total Disbursem
copy of a reconciled statement shoul  otal Disbursements from MOR-7  r Small Business Exhibit B-1  (When the debtor is a sole proprietorship)	ld be attached	d for each and	attach list if needed)  all accounts.  MFR-2  all	\$ 0.00 Total Disbursem
otal Disbursements from MOR-7 r Small Business Exhibit B-1 (When the debtor is a sole proprietorship)	Total D	isbursements fron	Lual)	\$ 0.00 Total Disbursem
1R-7 hip)	Total D	isbursements fron		Total Disbursem
Are all post-petition liabilities, including taxes, being paid within	terms? Yes No X			
Have any pre-petition liabilities been paid ? $\mathbf{Yes} \square \mathbf{No} \widecheck{\mathbf{X}}$ If so, explain	explain			
Are all U. S. Trustee Quarterly Fee Payments current? Yes 🔼 No				
What is the status of your Plan of Reorganization? Filed				
***The original of this document must be filed with the United		ırt and a copy must be	States Bankruptcy Court and a copy must be sent to the United States Trustee***	. Trustee***
Attorney Name: Erin Jones				
Firm: Jones Murray & Beatty LLP	I cert	ify under penalty of pe	I certify under penalty of perjury that the following complete	complete
Address: 4119 Montrose, Suite 230	Mon	thly Financial Report (	Monthly Financial Report (MFR), consisting of MFR-1 through	R-1 through
Address:	MFK	MFK-5 plus attachments, is true and correct.	true and correct.	
City State, Zip: Texas 77006		(9)		
Telephone: 713 5291999	SIC	SIGNED Pro Ho	STORE	
			(ORIGINAL SIGNATURE)	
MFR-1		Royce	James	Hassell

This FORM is for INDIVIDUALS ONLY

_	Petition Date: UZ/U4/2019	

CASE NAME: Royce	Hassell			CASE NUMBER:	ER:	19-30694	
CASH RECEIPTS AND	SCHEDULE	MONTH	2019   MONTH	2019   MONTH	2019   MONTH	2019   MONTH	2020   MONTH
DISBURSEMENTS	1 & J	August	September	October	November	December	January
1. CASH - BEGINNING OF MONTH		\$ 784,397.06	\$ 761,786.62	\$ 759,886.60	\$ 728,278.60		
RECEIPTS							
2. Wages, Salary, Commissions (net)		00.00	00.00	0.00			
3. Rents, Royalties, Dividends, Interest		714.66	634.80	587.88	61.67		
4. Social Security, Pension, etc.		0.00	0.00	0.00			
5. Other (attach list)							
TOTAL RECEIPTS	\$ 0.00	\$ 714.66	\$ 634.80	\$ 587.88	\$ 61.67	\$ 0.00	\$ 0.00
Draw from (Contribution to) Operation of Business MOR-7 or Small Business Exhibit B-1		0.00					
DISBURSEMENTS							
6. Rent or Home Mortgage Payment			00.00	0.00	27,760.38		
7. Utilities (electric/gas, water, telephone)		4,236.57	750.92	3,171.47	1,446.59		
8. Home Maintenance (repairs and upkeep)		18,305.67	4,095.70	973.80	1,842.02		
9. Food, Clothing, Laundry, and Dry Cleaning		1,737.32	543.88	793.76	1,272.57		
10. Medical and Dental		20.00	126.92	366.56	134.48		
11. Transportation (not including car payment)		1,266.11	369.93	1,115.73	538.99		
12. Recreations, Clubs, and Entertainment		10.00		79.54	35.94		
13. Insurance (not included in wages or home mortgage)		3,291.01	1,297.74	6,607.73	1,370.09		
14. Taxes (not included in wages or home mortgage)		00.00			1,392.49		
15. Auto Payment					1,481.53		
16. Credit Cards		2,285.00	4,000.00	39.91	6,813.92		
17. Other (attach list)							
SUB-TOTAL DISBURSEMENTS (for Individual)	\$ 0.00	\$ 31,181.68	\$ 11,185.09	\$ 13,148.50	\$ 44,089.00	\$ 0.00	\$ 0.00
18. PROFESSIONAL FEES	00.00	00.00	00.00				
19. U.S. TRUSTEE FEES	00.00	00.00					
TOTAL DISBURSEMENTS	\$ 0.00	\$ 31,181.68	\$ 11,185.09	\$ 13,148.50	\$ 44,089.00	\$ 0.00	00'0 \$
20. NET CASH FLOW	00.00	(30,467.02)	(10,550.29)	(12,560.62)	(44,027.33)	00.00	0.00
21. CASH - END OF MONTH	\$ 0.00	\$ 753,930.04	\$ 751,236.33	\$ 747,325.98	\$ 684,251.27	\$ 0.00	\$ 0.00

MFR-2

Revised-1/31/20

## This FORM is for INDIVIDUALS ONLY

POST-PETITION LIABILITIES	MONTH	MONTH	2019   MONTH	2019   MONTH	MONTH	2020   MONTH
	August	September	October	November	December	January
SECURED:						
Mr. Cooper	\$ 0.00					
Trustmark Mortgage co.	0.00					
Allegiance Bank	00.00					
(attach list)						
TOTAL SECURED	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
UNSECURED:						
(attach list)						
TOTAL UNSECURED	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
TAXES:						
(attach list)						
TOTAL TAXES	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
TOTAL POST-PETITION LIABILITIES (for Individual)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	00'0 \$	00.0 \$

Revised:1/31/2014